24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E) FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	
Conservative Campaign Committee	C C00495010
	M M / D D / Y Y Y Y
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee KTVT	Date of Public Distribution/Dissemination
	02 / 27 / 2014
Mailing Address 5233 Bridge Street	Amount
City State Zip	p Code 4250
	Transaction ID : 109173 Date of Disbursement or Obligation
Purpose of Expenditure 3/1 to 3/3 Television Advertising	Category/ Type M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District: 32
Katrina Pierson	Oppose President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name of Payee WFAA ABC TV 8	Date of Public Distribution/Dissemination
	02 / 27 / 2014
Mailing Address 606 Young Street	Amount
City State Zi	ip Code 9711.25
Dallas TX 7	75202-4810 Transaction ID : 109175 Date of Disbursement or Obligation
Purpose of Expenditure 3/1 to 3/3 Television Advertising	Category/ Type M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District: 32
Katrina Pierson	Oppose President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	13961.25
(a) SOBTOTAL OF HOMEON HASPONASIN EXPONANCIOSIN	1000.120
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Kelly Lawler [Electronical	lly Filed] Date 02 27 2014
Signature	